# Table 1: Submittal Requirements for Demographic Data Set

| Data Fields | Intake | Updates | | Disenrollment |
| --- | --- | --- | --- | --- |
| | | **Significant Change** | **Annual** | |
| **Basic Client Information**<br>▪ T/RBHA ID<br>▪ CIS Client ID<br>▪ Client name<br>▪ Date of birth<br>▪ Intake date<br>▪ Reason for submission | Submit All | Submit All | Submit All | Submit All |
| **Information Related to Initial Intake**<br>▪ Referral date<br>▪ Referral source<br>▪ Presenting concerns | Submit All | | | |
| **Descriptive Characteristics**<br>▪ Descriptive characteristics effective date<br>▪ Family Household Size (Collected for NON TXIX/XXI ONLY)<br>▪ Family household Income (Collected for NON TXIX/XXI ONLY)<br>▪ OMB ethnicity<br>▪ OMB race<br>▪ Treatment participation<br>▪ Other agency involvement<br>▪ Formal schooling level<br>▪ Special fund source identifier<br>▪ Special population identifier<br>▪ General medical condition (Axis III)<br>▪ Past substance use<br>▪ Primary substance use – age first used<br>▪ Secondary substance use – age first used | Submit All | | Submit All data fields with changes | |
| **Outcome Indicators and Diagnosis-Related Information**<br>▪ Outcome indicators effective date<br>▪ Employment status<br>▪ Educational status<br>▪ Primary residence<br>▪ Axis V (GAF/CGAS)<br>▪ Number of arrests<br>▪ Primary substance use (drug type, frequency, route)<br>▪ Secondary substance use (drug type, frequency, route)<br>▪ Axis I*<br>▪ Axis II*<br>▪ Behavioral health category* | Submit All | Submit All when changes in any of the asterisked data fields are reported | Submit All | Submit All |
| **Disenrollment Data**<br>▪ Reason for disenrollment<br>▪ Outcome Indicators and Diagnosis-Related Information (see above) | | | | Submit All |

10/22/03